

## Electronic Filing Agreement

I, the undersigned, am the candidate and/or duly designated treasurer of the committee listed and do hereby affirm that:

I intend to file all financial statements required for this committee electronically by use of the VAFiling software developed by the Virginia State Board of Election.

I agree to generate and submit, by e-mail, an electronic file of the required report on or before the report deadline.

The financial statements that I will file on behalf of the committee will be complete, accurate and contain all information required by Chapter 9 of the Code of Virginia, for the period covered by the report; and the Personal Identification Number that will be issued to the treasurer of the committee will be used in place of any required signature(s).

\_\_\_\_\_  
NAME OF CANDIDATE, CANDIDATE'S CAMPAIGN OR POLITICAL COMMITTEE

\_\_\_\_\_  
OFFICE SOUGHT (If Applicable)

\_\_\_\_\_  
MAILING ADDRESS

\_\_\_\_\_  
COUNTY/CITY/DISTRICT (If Applicable)

\_\_\_\_\_  
CITY, STATE, ZIP CODE

\_\_\_\_\_  
DATE OF ELECTION (If Applicable)

( )

\_\_\_\_\_  
DAYTIME TELEPHONE NUMBER FOR TREASURER

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### Candidate Campaign Committees

\_\_\_\_\_  
CANDIDATE'S NAME

\_\_\_\_\_  
CANDIDATE'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CAMPAIGN TREASURER'S SIGNATURE

\_\_\_\_\_  
DATE

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### Political Committees

\_\_\_\_\_  
POLITICAL COMMITTEE TREASURER'S NAME

\_\_\_\_\_  
SIGNATURE OF POLITICAL COMMITTEE TREASURER

\_\_\_\_\_  
DATE

FOR OFFICE USE ONLY

COMMITTEE ID NUMBER: \_\_\_\_\_

PIN ASSIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_